INSTALL (RELOCATE) PATIENT HEADWALLS AND PATIENT LIFT SYSTEMS FOR BUILDING 7H

Project No. 640-15-161

Department of Veterans Affairs

Palo Alto Health Care System

Palo Alto, CA 94304

STATEMENT OF WORK

PROJECT TITLE: RELOCATE PATIENT HEADWALLS AND PATIENT LIFT SYSTEMS FOR BUILDING 7H, VA PALO ALTO HEALTH CARE SYSTEM.

PROJECT NO: 640-15-161

DATE: June 10, 2015

EXECUTIVE SUMMARY

A. **PROJECT DESCRIPTION:** Contractor to provide all engineering, labor ,material, equipment, testing and transportation, necessary for the relocation of existing medical gas outlets; electrical receptacles; and existing J-tracks and its support system for the patient lifts; and Installation of backer plates for the TV mounts,

B. **PROJECT LOCATION:** Veterans Affairs Palo Alto Healthcare System (VAPAHCS), Building 7H, 3801 Miranda Avenue, Palo alto, California,94304.

1. PROJECT BACKGROUND

1.1. Patient Headwall system:

a. There are 13 patient bed rooms and each bedroom has a patient head wall. The existing horizontal type patient headwalls are located at the backside of the beds and the medical gas outlets are in the middle of the each headwall. The current placement of the med gas panel poses a potential risk for injury due to nurses needing to raise the bed up and down. The location of the med gas panel is right by the veteran's head where they will be exposed to non-stop hissing of the oxygen (if needed) as well as the call light noise. It will completely disrupt the veteran's sleep hygiene negatively impacting their overall recovery and inpatient experience. VA has decided to relocate these gas outlets as indicated on the sketch.

b. The system is recently installed by the contractor, and the inspection was done by FS Medical Technology.

1.2. Patient lift system: There are 13 patient bed rooms and each bedroom has ARJO patient lift systems. The existing J-location of the tracks of these lifts are not at proper location and they are 10 to 12 inches too close to bed's headboard and patient can hit his head while using the lift. To make the system functional, track needs to be moved 10 to 12 inch toward the foot of the bed.

1.3. In the original design, the TV mount was supposed to be on the Nurse side of the bed, which if installed would have interference with patient care. To avoid the patient care interference, VA has decided to install the TV mounts towards the window side.

2. PROJECT SCOPE AND STATEMENT OF BID ITEMS

2.1. Contractor to provide all engineering, labor, materials, equipment, tools, testing, transportation and supervision necessary to relocate the existing medical gas outlets, and existing J-tracks and its support system for the patient lifts. The work includes the following:

A. Relocate the existing outlets of medical gas systems, which at present are located on the backside of the patient beds, to new location i.e., towards the patient's bedside cabinet as shown in **Sketch A** attached. The medical gas system includes Oxygen, Medical Air and Vacuum. These outlets are housed in each existing Headwalls (13 each), HSI model - Infinity Horizontal Headwall. The relocation of the outlets includes, but is not limited to :

1) Remove the existing head wall enclosure and provide new longer/wider enclosure as needed to accommodate the relocation of the existing med gas outlets, other outlets (emergency and normal power duplex receptacles) located inside the headwalls to remain at the same location.

2) Modify/extend the existing piping of med gas system as needed. For reference of existing piping, see **Sketch A-1 & Sketch A-2.**

3) Relocate existing electrical receptacle and nurse call button (1 each next to each headwall) under the new proposed headwall enclosure to facilitate the installation of new head wall enclosure

4) After the relocation/installation of the med gas systems, inspect, retest and recertified the system as indicated in the specification sections 22 62 00 and 22 63 00 which also includes testing of the local alarm panel located near nurse call station and facilities master alarm panels which includes Building 100 Police master alarm panel, Building 100 control room mater alarm panel, Boiler room master alarm panel and Building 7 master alarm pane F- Wing F Nurse Station. The line diagram of master alarm panels is provided with scope.

5) **REFERENCE:**

a. The existing patient head wall system is provided by HSI (Hospital System), the product data is provided with the solicitation. The local point of contact for HIS is Jim Stewart whose office is at 750 Garcia Ave., Pittsburg ca 94565, and cell phone number are 925-427-7800, 925-470-7064 respectively. E-mail is JStewart@HSIheadwalls.com

b. The newly installed/existing med gas system was tested by FS medical Technology 11300 Sanders drive, suite 1, Ranch Cordova, Ca 95742. Point of contact for that company is Dale Terry and his phone numbers are 916-853-1222 (cell: 916-952-0923. His e-mail is Dterry@FSMT.com

B. Relocate thirteen (13) existing J-track and its support systems, for patient lifts, 12 J-tracks for patient lift model ARJO -MAXISKY 600 and one track for patient lift model ARJO - MAXISKY 1000. The relocation of the J tracks includes, but is not limited to

1) Contractor is required to contact and coordinate the relocation of the J-track system with the manufacturer/supplier of the patient lift system.

2) Contractor with the help of manufacturer to visit the site and determine the new location of J tracks. During the contractor's site investigation, VA will provide the patient bed at site, to facilitate the layout/ location of the tracks. (The make and model number of the patient bed to be used is- Stryker-model S3 MedSurg Bed with StayPut frame REF 3005)

3) Provide all the structural calculations and shop drawings of the new support system

4) After the relocation of J-Track system, it shall be re-certified by the manufacturer/installer or a third party as required in spec section 11-73-00 and facilities installation check list-Patient Safety alert AL14-07.

5) To accommodate the new jack track, relocate/modify lighting fixtures, air outlets or any other item as needed.

6) **REFERENCE:**

a. The name of the supplier/manufacturer is ARJOHuntleigh-Getinge Group, 2349 West Lake Street, Addison IL 60101

b. Point of contact: Bill Ashbrook, Regional Project Specialist, Phones:

1. 800 323 1245 ext. 54803

2. Direct -630-785-4803

3. Cell-509 869 4154

4. E-mail- William Ashbrook William.Ashbrook@ArjoHuntleigh.com

5. Jimmy.Batila@ArjoHuntleigh.co

C. Contractor to provide and install the Backer plate PDI-255E-16 over the exiting case work, to facilitate the installation of the TV and its swing arm at thirteen patient rooms as indicated.
(Note- VA will obtain and install the TV and its swing arm). The installation of the plate includes:

1) Contractor to buy and install the Backer Plate model PDI 255E-16 and modify the backer plate. The plate has four (4) ¼" inch diameter slotted holes at each corners

2) At each room locate the metal studs behind the case work (at location shown in **Sketch B,** the metal studs were found to be at 13" O/C), and provide two extra holes in the plate to match the metal stud layout o see **Sketch B1**

3) Provide ¼" fasteners 2 each, per stud total (4) minimum.

4) For case work frame see **Sketch B2,** for reference, Note-all the metal studs may or may not be at same O/C.

D. In OI&T room # , relocate existing quads (20 amps, 120 volts, double duplex receptacle outlets, Hospital grade-Emergency power) from top of the OI&T rack to the wall as shown in **Sketch C**.

E. In OI&T room # provide new 20 amp, 120 volts, hospital grade, wall mounted receptacle as indicated in **Sketch C**

F. In all 13 patient bathrooms, replace existing Hospital grade, E, Emergency power duplex receptacle with E, emergency power , **WP-GFI** power duplex receptacle for auto sensors , mounted under the sink (at 2 locations in each bathroom). For location see **Sketch D**

2.2. The contractor shall maintain valid and current contractor's licensure, verifications, and certifications, as applicable for this project.

3. SITE INVESTIGATION: Investigate the site ascertain the general and local conditions which can affect the work or its cost. Also see specification section 01 00 00 for General Requirements.

4. REFERENCE SPECIFICATIONS AND DRAWINGS: The following specification sections and the drawings related to the scope are provided with the bid package. These specs and drawings were part of the original construction of the building (Project# 640-380). Work shall conform to the **applicable** paragraphs of these specification sections and drawings:

4.1. **Drawings:** Following are the drawings and product submittal of existing headwalls and patient lift system.

a. Architectural

- Drawing 007AS 2-23
- Drawing 007AS 2-246/10/15
- Drawing 007AS 4-10
- Drawing 007AS 4-11
- Drawing 007AS 6-01
- Drawing 007AS 6-02
- Drawing 007AS 11-00 (Note-Head wall provided is model HIS)

b. Electrical

- Drawing 007ES 2.02
- Drawing 007ES 5.1

c. Plumbing

- Drawing 007PL 1.0
- Drawing 007PL 2.11
- Drawing 007PL 2.12
- Drawing 007PL 4.30

d. Structural

- Drawing 007SS 2.2

e. Patient Headwall Product data
f. Line diagram- Master alarm panels

4.2.**Specifications:** For quality control, material and testing use all the applicable sections of the specifications.

a. 01 00 00 GENERAL REQUIREMENTS
b. 01 00 01 RULES OF STATION
c. 01 33 23 SHOP DRAWINGS, PRODUCT DATA, AND SAMPLES
d. 01 74 19 CONSTRUCTION WASTE MANAGEMENT
e. 01 84 00 FIRE STOPPING
f. 10 25 13 PATIENT BED SERVICE WALLS
g. 22 62 00 VACUUM SYSTEM FOR HEALTHCARE FACILITIES
h. 22 63 00 GAS SYSTEMS FOR HEALTHCARE FACILITIES
i. 26 05 11 REQUIREMENTS FOR ELECTRICAL INSTALLATION
j. 26 05 21 LOW VOLTAGE ELECTRICAL POWER CONDUCTORS
k. 26 27 26 WIRING DEVICES
l. ALERT AL 14-07

4.3. As-built Drawings. The contractor shall be responsible to provide as built drawings upon completion of the work. For the contracting officer's representative, as well as provide clarification for any work elements in question. VA will provide the required CADD drawings during construction

4.4. The contractor may, at their own expense, create additional drawings and specifications for the purpose performing the work described in the contract, using electronic files furnished by the government.

5. COMPLIANCE WITH CODES AND STANDARDS

5.1. The contractor shall comply with all design drawings and specifications during the project, including applicable codes and standards

5.2. To safeguard public health and safety, additional codes or standards may be imposed by the contracting officer's representative, VAPAHCS Safety Officer, and Infection Control Officer. These additional requirements will be given to the contractor by the contracting officer's representative and included in the construction documents and specifications.

6. ADDITIONAL CONSIDERATIONS

6.1.1 Restoration Plan: Including, but not be limited to, general requirements, restoration for any damages to existing walls, ceiling, equipment, wires, or utilities during construction.

6.1.2 Submittal Register Schedule: The submittal register included with-in the project specifications lists individual submittal sections with schedule and submittal descriptions

6.1.3 . Utility shutdowns. The contractor shall be responsible to identify utility shutdowns that may impact hospital functions. The contractor shall manage the orderly shut-down and connection to existing utilities as needed, including but not limited to electrical, telecommunications, data, fire alarm/sprinkler system, and HVAC systems, as well as ensure that such construction does not interfere nor interrupt VAPAHCS operations outside of the construction area. The contractor shall coordinate all utility shutdowns that may impact hospital functions with the contracting officer's representative

6.1.4 Interim Life Safety Measures (ILSM). Contractor shall coordinate with the contracting officer's representative, VA Safety Officer, VA Infection Control, and AE firm, to comply with any Interim Life Safety Measures required during construction. This may include, but is not limited to, adhering to phasing plans, code compliance plans, egress plans, and project specifications. Life Safety Measures will include the following, at a minimum:

6.2 Station Operations. The contractor shall generally perform all on-site visitation or work between the hours of 8:30 AM and 4:30 PM, Monday through Friday (Federal Holidays excluded), unless otherwise approved by the contracting officer's representative. The contractor may be required to perform all or part of work elements involving significant

noise or vibrations affecting nearby areas outside of these normal work hours, in order to avoid impacting daily operations.

7. COORDINATION AND EXECUTION.

7.1. The contractor is advised that only the contracting officer has authority to alter the contract once awarded, or to legally obligate the government pursuant to any changes in the scope of the project thereof.

7.1.1 Contracting Officer (CO): The CO shall be responsible for all contractual administration of this project. All transactions of a legal nature, including contractual agreements, amendments, change orders, etc. shall be approved and processed through the CO.

7.1.2 Contracting Officer's Representative (COR): The COR shall be responsible for the construction management on behalf of the VA and will manage the project on a day-to-day basis to ensure that the project requirements are met from the notice to proceed through completion of the work and acceptance, according to project scope of work and construction documents or specifications.

7.1.3 End Users: The contractor may be required to work closely with the end user groups, generally through the coordination of the COR, in order to mitigate or minimize impact to ongoing operations in adjacent workspaces. Project user groups for this project may include the cardiology suite staff, biomedical engineering, facility planning, facility maintenance, and the other support staff.

7.2. Construction Administration.

7.2.1 Project Schedule. After award of contract the contractor shall provide to the VA a detailed schedule of all project activities, including milestone dates and critical paths, as well as update such schedule if plans are modified during the course of the project.

7.2.2 Schedule of Values. The contractor shall provide a schedule of values, along with the project schedule, which is aligned with the various activities of work. This schedule of values, if approved, may be used by the contracting officer's representative as a basis for evaluating reviewing progress performance and payments.

7.2.3 Observation and Site Visits. The contracting officer's representative and/or designated representatives may require access in order to monitor, observe, and review all aspects of the project to ensure compliance with the construction documents and other regulatory requirements.

7.2.4 Project Meetings and Inspections. The contractor shall be required to attend or provide a designated representative for coordinated field observation inspections for progress evaluations and reports, and other site visits as needed, including punch list or pre-final and final inspections. Such inspections may occur on a monthly basis, or more frequently as needed. The contracting officer's or other designated representatives may inspect all aspects of the project in order to complete written progress reports, including the

performance of work activities in the project schedule or schedule of values, and verification of the contractor's compliance with applicable safety, infection control, or interim life safety requirements.

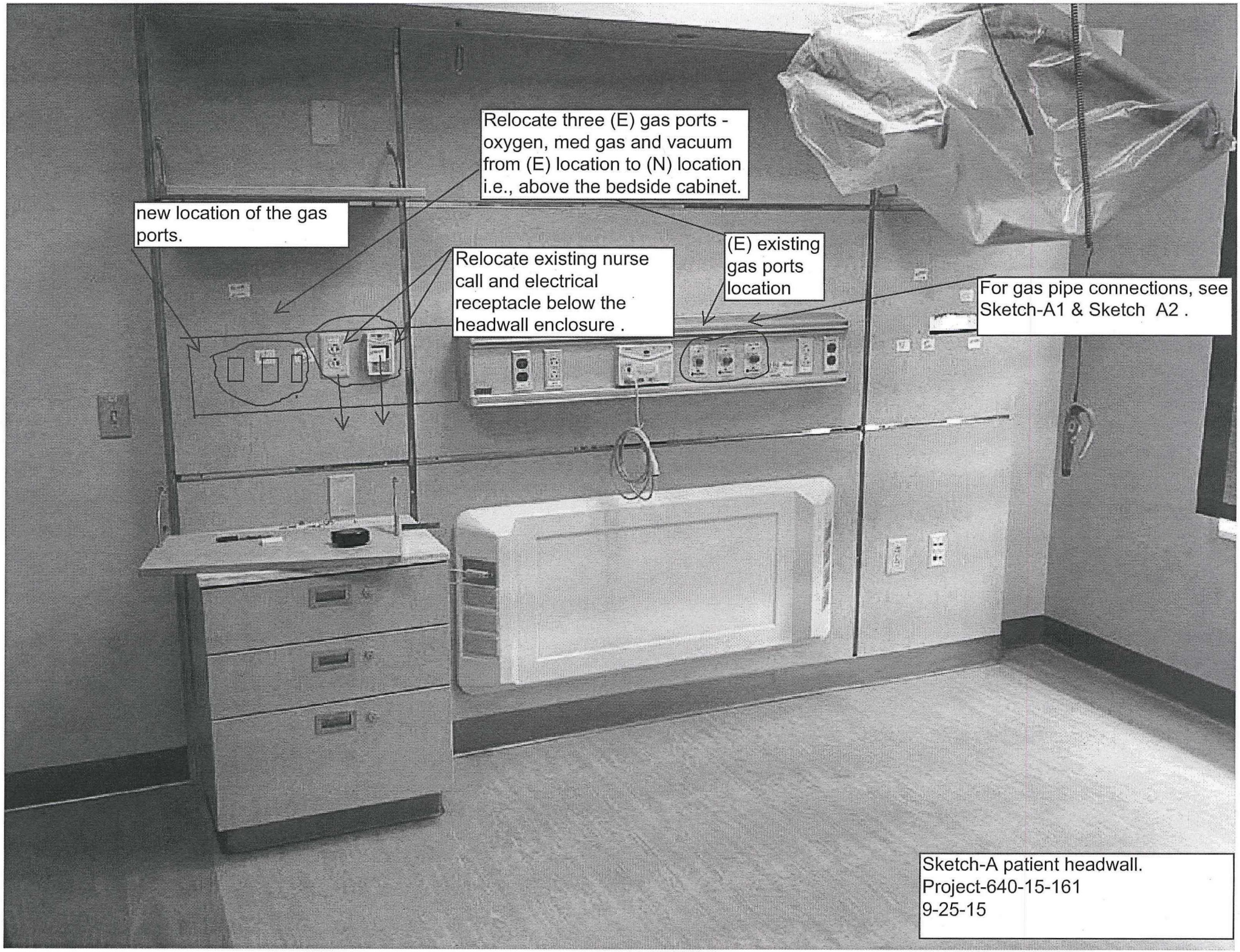
7.2.5 Submittals. The contractor will be responsible to furnish submittals in accordance with the design specifications and submittals register. The contractor shall submit shop drawings, schedules, manufacturer's literature and data, and certificates in electronic format. Physical samples shall be shipped directly to the AE for inspection, and one sample furnished to the contracting officer's representative for approval. Further details are provided in the project specifications for shop drawings and submittals.

7.2.6 RFIs and Change Orders. During construction the contractor may submit requests for additional information concerning the design or other aspects of the project; however these must be submitted in writing. These must include, at a minimum, a description of or background information for the issue in question, as well as a complete impact assessment for any recommended changes. The contracting officer's or designated AE representative will review, evaluate, and respond as required. Any proposed changes to the scope or deviations from the design documents may be submitted to the contracting officer's representative for review and discussion, however any such changes to the contract or scope of the project must first be approved by the contracting officer in writing before implementation.

ATTACHMENTS/PICTURES

1. Sketch A
2. Sketch A1
3. Sketch A2
4. Sketch B
5. Sketch B1
6. Sketch B2
7. Sketch C
8. Sketch D

End of Section


Relocate three (E) gas ports - oxygen, med gas and vacuum from (E) location to (N) location i.e., above the bedside cabinet.
new location of the gas ports.
Relocate existing nurse call and electrical receptacle below the headwall enclosure .
(E) existing gas ports location
For gas pipe connections, see Sketch-A1 & Sketch A2 .
Sketch-A patient headwall.
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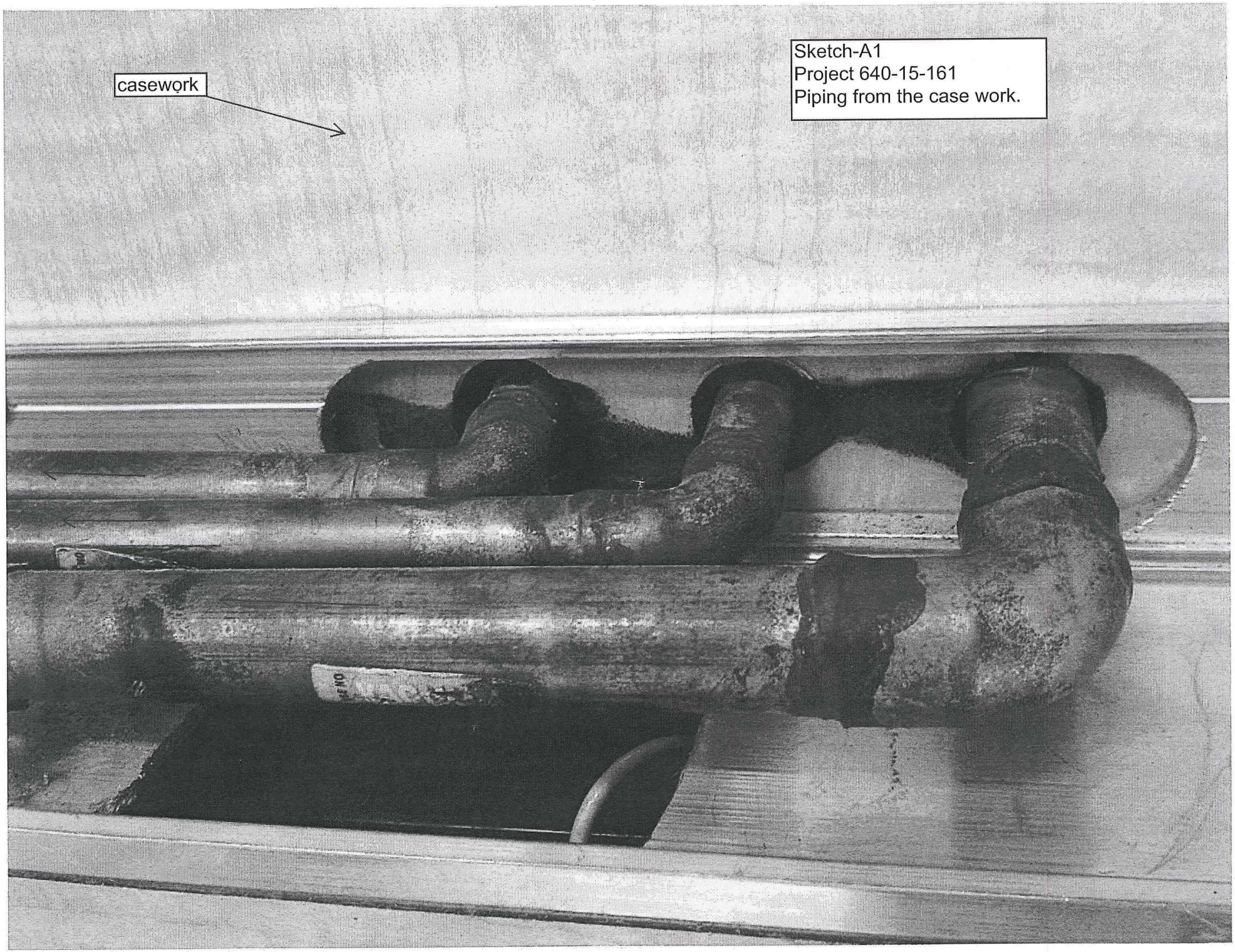
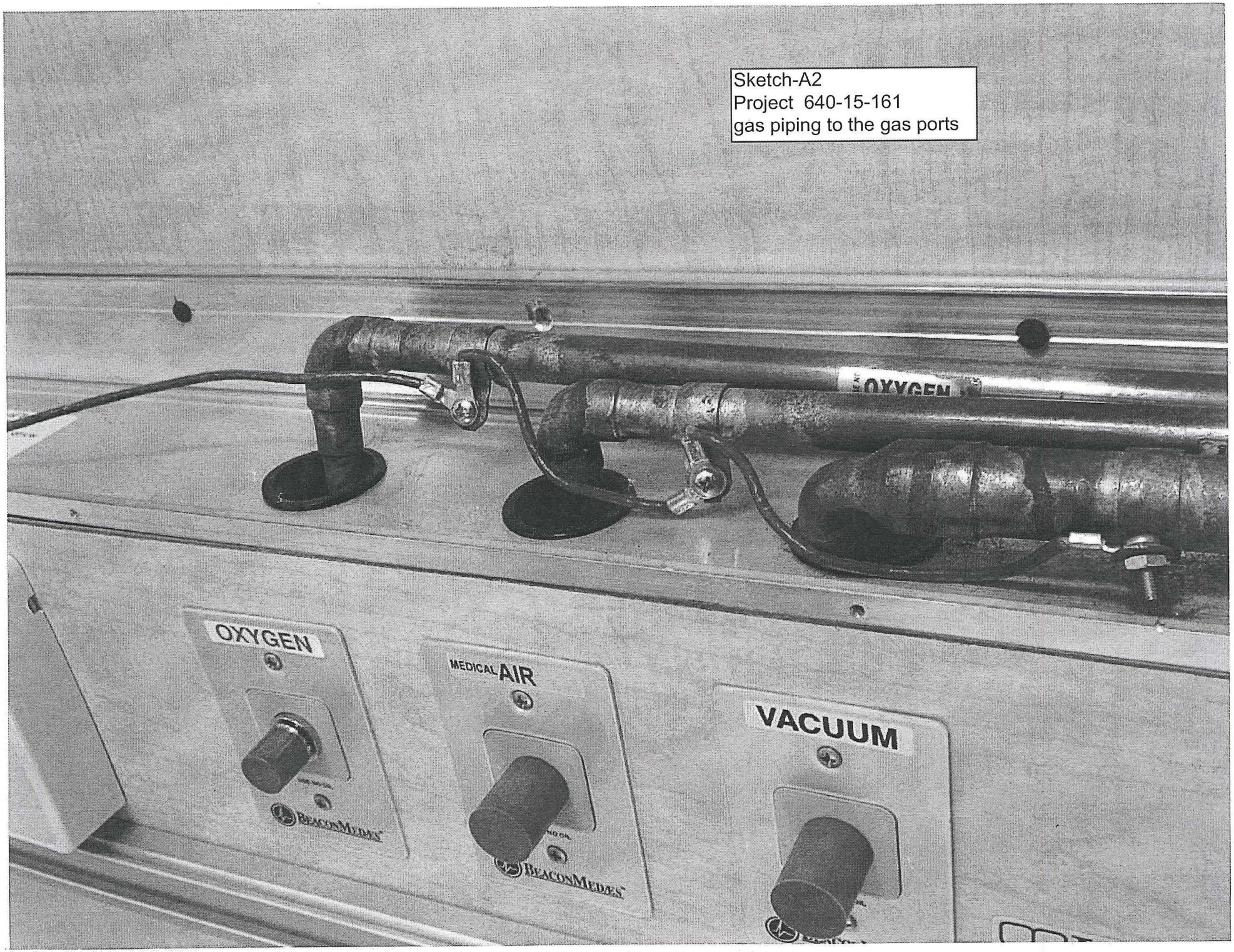
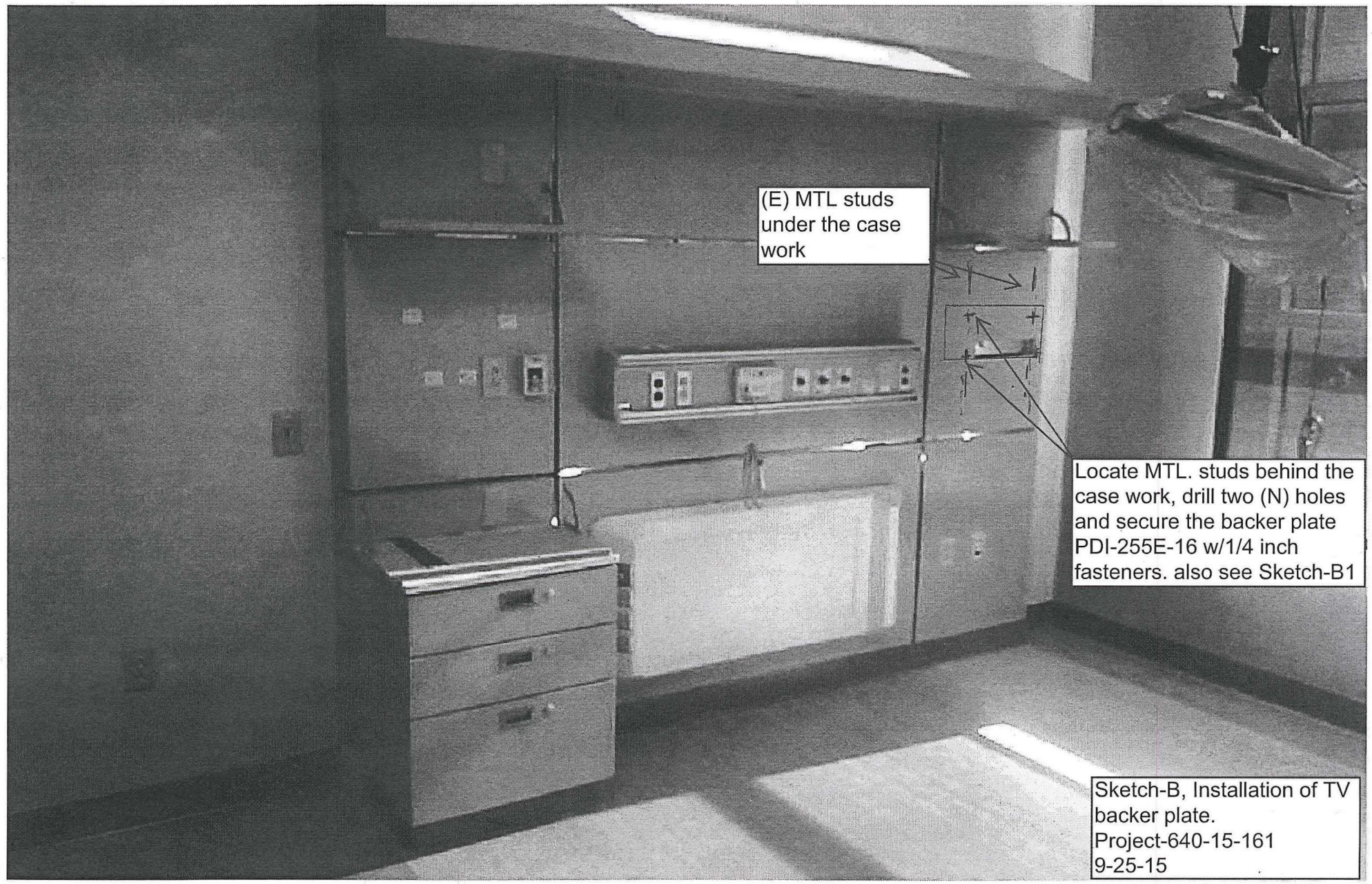


Sketch-A1
Project 640-15-161
Piping from the case work.


Sketch-A2
Project 640-15-161
gas piping to the gas ports
OXYGEN
MEDICAL AIR
VACUUM
BEACONMEDAES
BEACONMEDAES


(E) MTL studs under the case work
Locate MTL. studs behind the case work, drill two (N) holes and secure the backer plate PDI-255E-16 w/1/4 inch fasteners. also see Sketch-B1
Sketch-B, Installation of TV backer plate.
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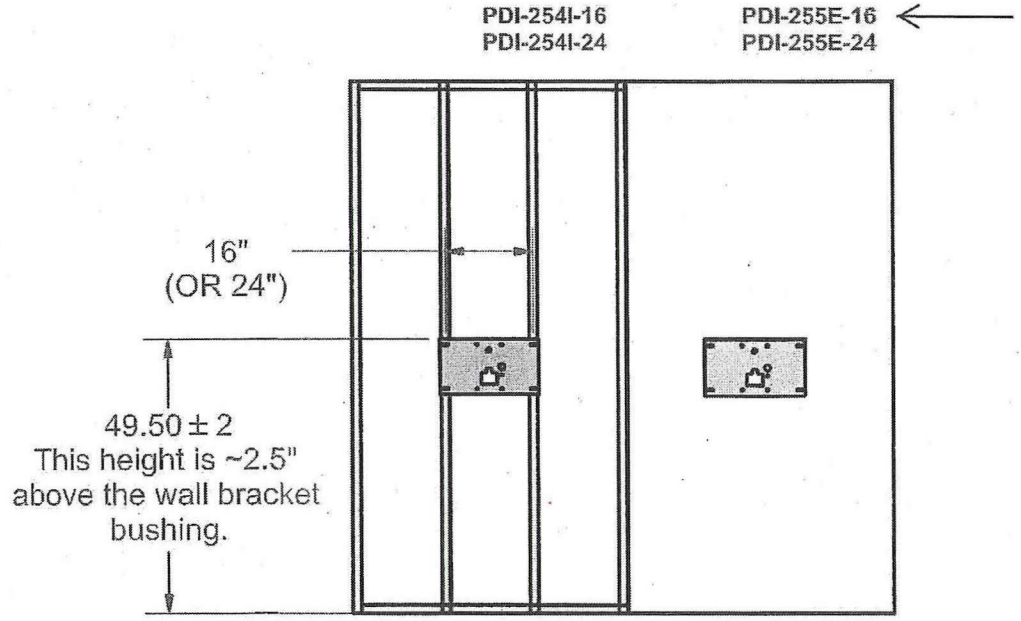
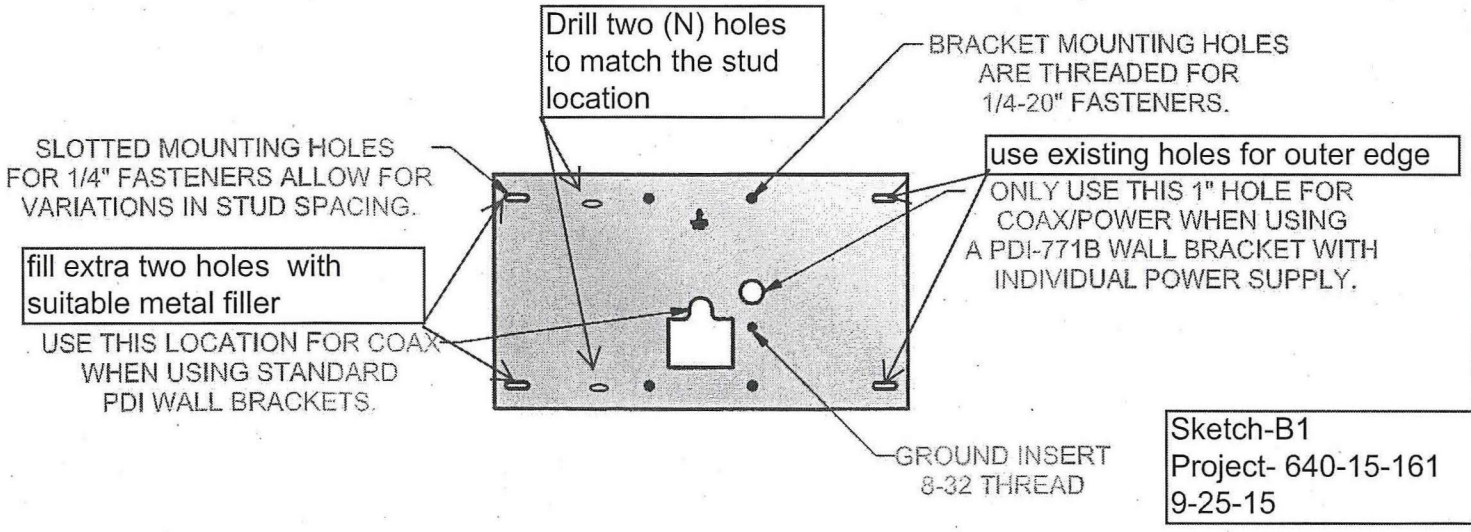
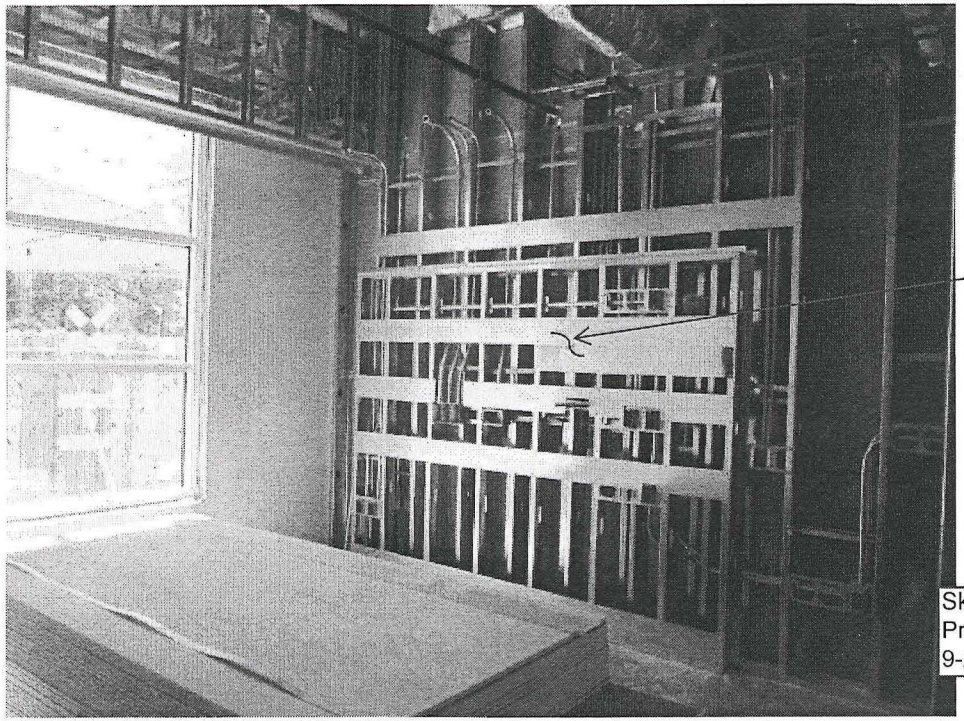
PDI™ Communication Systems Inc. *Better Solutions Are Within Reach™*	MODEL NUMBER: **PDI-254I & PDI-255E**	DOCUMENT NUMBER: PD198-094 R2
	BACKER PLATE MOUNTING INSTRUCTIONS	Page 1 of 1

Installation of PDI internal or external reinforcing plate.
The 254I plates are for internarl mounting, behind the drywall. They are uncoated.
The 255E plates are external for mounting on top of the drywall. They have a powdercoated finish.
The "-16" and "-24" suffixes refer to the wall stud spacing the plates are designed to be used with.
The plates are marked with an arrow and "TOP" to indicate proper mounting orientaion.
The plates must be mounted in accordance with local building codes.



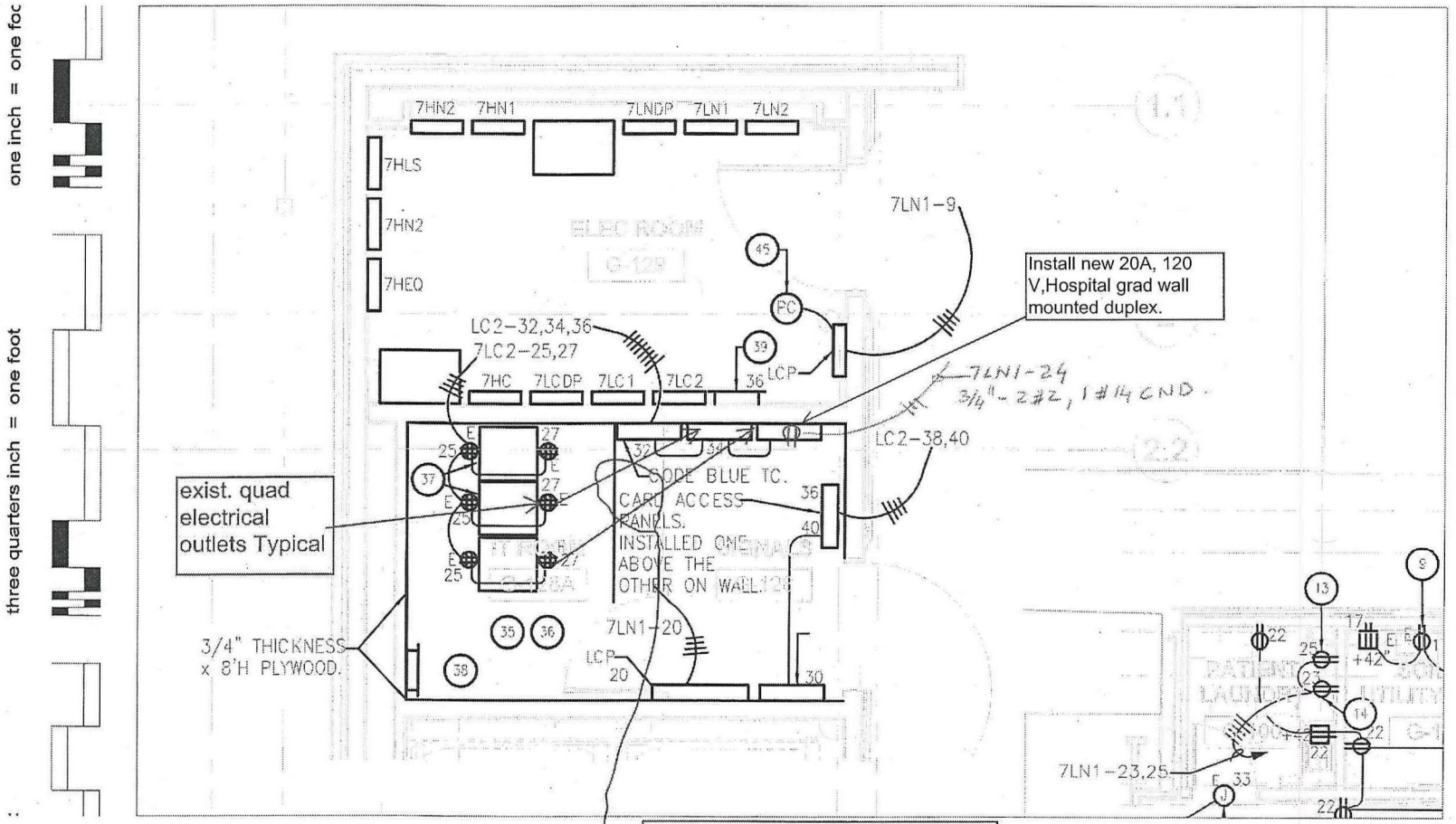


Sketch-B1
Project- 640-15-161
9-25-15



case work framing

Sketch-B2
Project-640-15-16
9-25-15



Sketch-C (Detail-3 of ref. drawing ES2.02
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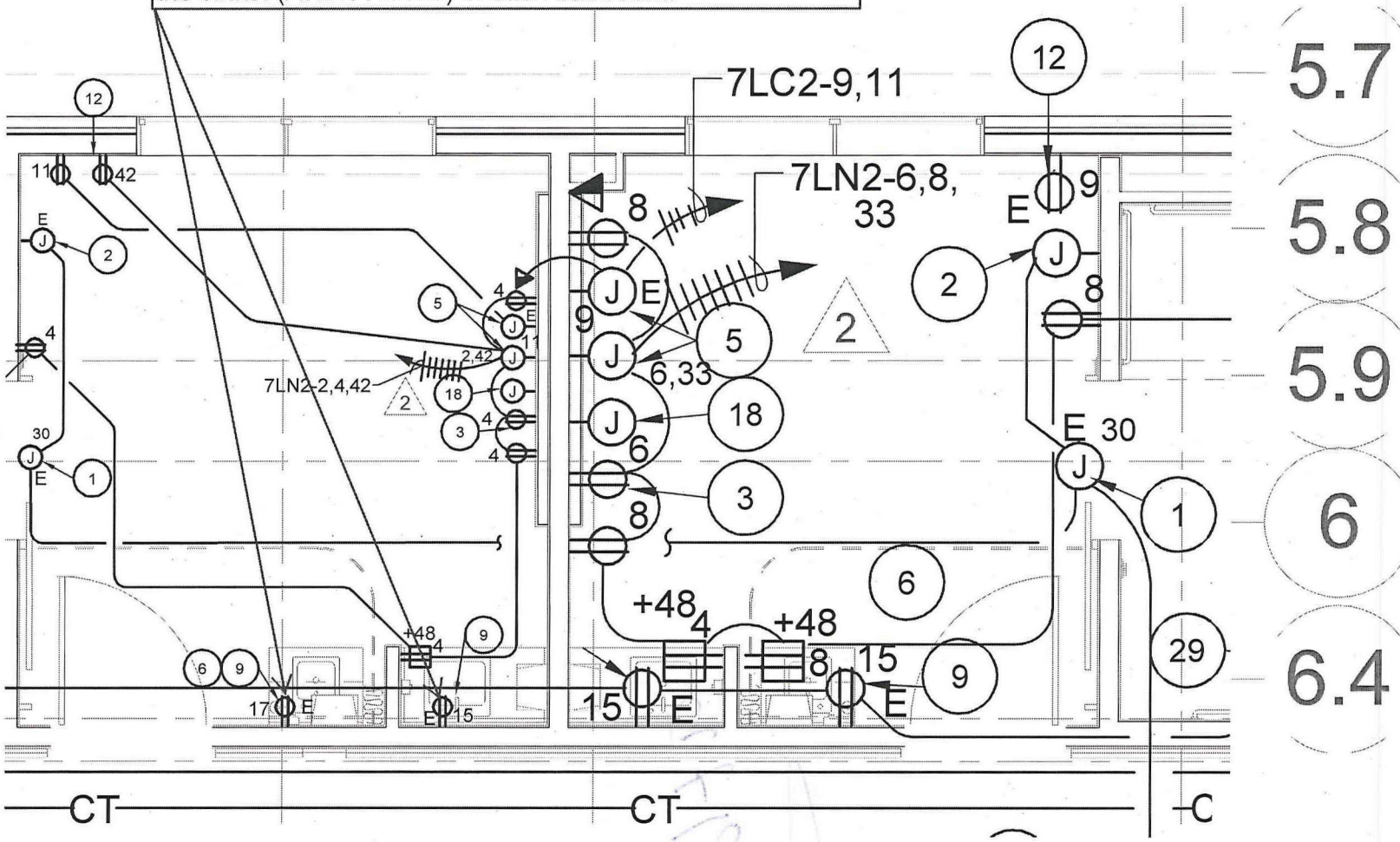
Replace existing Hospital grade, E, Emergency power duplex receptacle with E, Emergency power, WP-GFI power duplex receptacle for auto sensors, mounted under the sinks. (At 2 locations) in each bathroom.



5.7
5.8
5.9
6
6.4

3/4" THICKNESS x 8'H PLYWOOD.

.7

2 ENLARGED PLAN — SCI BED 108

007 FS 2.02 SCALE: 1/4" = 1'-0"

2 EN

007 FS 2.02 SCALE:

Sketch-D (Detail-2 of ref. drawing ES2.02)
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